FEC FORM 1

STATEMENT OF ORGANIZATION

(See instructions)

SECRETARY OF THE SENATE

09 SEP 14 PM 12: 09

1.	NAME OF COMMITTEE (in full)		(Check if name is changed)		mple: If typying, type the lines	12FE4M	5			
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	(Check if address is changed)	Mu	Muskogee			OK 74402				
				CITY		STATE		ZIP C	ODE 📥	
COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)										
	(Check if address is changed)	wel	omaster@coburnf	orșena	ite.com				<u> </u>	
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	(Check if address is changed)		w.coburnforsenate	e.com						
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2. DATE MM / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y										
3. FEC IDENTIFICATION NUMBER C C00409888										
4.	IS THIS STATEMENT	NE	W (N) OR	×	AMENDED (A)					
	rtify that I have examined this S		nd to the best of my know Wo de Wade A. Stubbs	ledge ar	nd belief it is true, correct ar	nd complete				
			Wode	∮ , ∞	Stubbs	F				
Sig	nature of Treasurer Elect	ronically Fi	led by Wade A. St	ubbs		Date (9 ′	04	20	0 9
МО	TE: Submission of false, errone				he person signing this Stat			of 2 U.S.C. §	437g.	
	Office Use Only				For further information Federal Election Commis Toll Free 800-424-9530 Local 202-694-1100			FEC FO		

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